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BASIC FEE (37 CFR 1.16(a))				- CATTO	RATE	FEE	-	RATE	FEE	4
TOTAL CLAIMS (37 CFR 1.16(c))		minus	20 -		1	-	OR	 	<u> - - - </u>	4
NDEPENDENT CLA	IMS				- × •		OR	X \$=		
(37 CFR 1.16(b)) minus 3 = .				X \$=		OR	X \$=			
ULTIPLE DEPENDE	NT CLAIM PRESE	MT	(37 CFR 1.16(d))		+ \$=		OR	+ \$_ =		7
If the difference in	column 1 is less th	nan zero,	enter *0" In colum	n 2.	TOŢAL		OR	TOTAL		1
С	LAIMS AS AN	MENDE	D – PART II					· i		7
	(Column 1)	——————	(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHEI SMALL	R THAN	
	CLAIMS REMAINING:		HIGHEST NUMBER	PRESENT	RATE	ADDI-] .			†
,	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TICNAL FEE	.: •	RATE	ADDI- TIČTEAL	15
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Independent (37 CFR 1.16(b))	. 2	Minus	"3	= (x s/00=	 	OR	1112 77 72 7] ;
FIRST PRESENT	ATION OF MULTIPL	F DE0546			1 ——	1-2	OR	x <u>₹200</u> =		<u>.</u>
· ····o····icocivi	THOUGH MOETIFE	E DEPENL	JENI CLAIM (37)	ZFR 1.16(d))	+1/80=	 	OR	+,360		<u>-</u>
	•			•	TOTAL ADD'L FEE		-OR	ADO'L FEE]
T	(Column 1) CLAIMS	·	(Column 2)	(Column 3)		·	-			
	REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT. EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b))		Minus	**	=	1	FEE			FEE	
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 			l	J	X \$=	·	OR	X \$=		
FIRST PRESENTA	TION OF MULTIPLE	DEPEND	ENT CLAIM (37 C	FR 1.16(d))	+\$=		OR	+\$=	•	
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-	(Column 1)		(Column 2)	(Column 3)	L	`		:		
	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI-		RATE	ADDI-	
Total	AMENDMENT	<u></u>	PAID FOR			TIONAL • FEE			TIONAL FEE	
(37 CFR 1.16(c))	;	Minus			x s=		OR	x \$=	'	
(37 CFR 1.16(b))		Minus	•••	=	x \$ =		٠٠		17, 1	
AFTER AMENDMENT PREVIOUSLY EXTRA Total (37 CPR 1.16(c)) Minus "" = Independent (37 CPR 1.16(c)) Minus "" = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPR 1.16(d))							OR	X \$=		
			•		TOTAL		OR	+ \$ =		
• If the entry in colu	mn 1 is less than	the entry	la column 2 write	a "O" In column 3	ADD'L FEE		OR .	ADD'LFEE'	<u> </u>	
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"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which, is to file (and by the public which, is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pateint and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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